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PTO/SB/21 (09-04)

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U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/802,098 TRANSMITTAL Filing Date 3/16/2004 **FORM** First Named Inventor Richard Springwater Art Unit 3652 Examiner Name G. Adams (to be used for all correspondence after initial filing) Attorney Docket Number SPRNG-01001US1 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC ~ Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Change of Correspondence Address Status Letter Affidavits/declaration(s) Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request below): Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Applicant is submitting a divisional application on today's date claiming Reply to Missing Parts/ priority to this application. No reply will be filed in this application to the Incomplete Application office action dated November 30, 2005. Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Fliesler Meyer LL Customer No. 23910 Signature Printed name Martin C. Fliesler Date Reg. No. May 24, 2006 25.656 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient poslage as first class mall in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Fax No. 571-273-8300 Signature Michelle McAnern Calavita May 24, 2006 Typed or printed name

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Attorney Docket No.: SPRNG-01001US1 mcf/spmg/1001US1/Reply A - TL.pdf

## RECEIVED **CENTRAL FAX CENTER**

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PTO/SB/22 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER	R 37 CFR 1.136(a)	Docket Number (Optional	)					
FY 2005 (Fees pursuant to the Consolidated Appropriations Ac	ct, 2005 (H.R. 4818).)	SPRNG-01001	JS1					
Application Number 10/802,098	:	Filed 3/16/2004						
For METHOD AND SYSTEM FOR AUTOMAT	CALLY PARKING V	EHICLES						
Art Unit 3652	:	Examiner G. Adams	3					
This is a request under the provisions of 37 CFR 1.1 application.	36(a) to extend the perlo	d for filing a reply in the	above identified					
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):								
	<u>Fee</u>	Small Entity Fee						
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$					
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$					
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	<u>\$ 510.00</u>					
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$					
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$					
Applicant claims small entity status. See 37 CFF	R 1.27.							
A check in the amount of the fee is enclose	: Ö.							
Payment by credit card. Form PTO-2038 is	attached.							
The Director has already been authorized to	o charge fees in this er	plication to a Deposit	Account.					
The Director is hereby authorized to charge	-	•						
Deposit Account Number 06-13	25 I have	enclosed a duplicate	copy of this sheet.					
WARNING: Information on this form may become provide credit card information and authorization		tion should not be includ	ed on this form.					
I am the applicant/inventor.	:							
assignee of record of the entire interest. See 37 CFR 3.71.								
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  attorney or agent of record. Registration Number 25,656								
attorney or agent under 37 C			_					
Registration number if acting und								
Want / M		May 24	. 2006					
Signature	<del></del>	Da	<del></del>					
Martin C. Fliesler		415.36						
Typed or printed name		Telephone	Number					
NOTE: Signatures of all the inventors or assignees of record of the esignature is required, see below.	Intire interest or their representa	tive(s) are required. Submit mu	ltiple forms if more than one					
Total of forms a	e submitted.	•						
This collection of information is required by 37 CFR 1.136(a). The info ISPTO to process) an application. Confidentiality is governed by 35 to complete, including gathering, preparing, and submitting the complete comments on the amount of time you require to complete this form and J.S. Patent and Trademark Offico, U.S. Department of Commerce, P. CORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents	U.S.C. 122 and 37 CFR 1.11 and application form to the USPTC Uor suggestions for reducing thi D. Box 1450, Alexandria, VA 22	d 1.14. This collection is estima I. Time will vary depending upon s burden, should be sent to the 313-1450. DO NOT SEND FEI	ated to take 6 minutes to on the individual case. Any Chief Information Officer,					
if you need assistance in comple	ting the form, call 1-800-PTO-91	199 and select option 2.						
httorney Docket No.: SPRNG-01001US1 incf/spmg/1001US1/Reply A - EOT.pdf								

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MAY 2 4 2006

PTO/SB/17 (12-04)
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Pagistertian No.	Under the Panerwork Rec	duction Act of 1995	no persons are requi	ired to re				a valid OMB control number	
FEE TRANSMITTAL For FY 2005    Applicant claims small entity status. See 37 CFR 1.27   Etimo Date   3/16/2004	Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)			4040					
FIGURE Applicant claims small entity stetus. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT (\$) \$10.00  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number. 06-1325  Popesit Account Number. 06-1325  For the above-identified deposit account, the Director is hereby suthorized to: (check all that apply)  Charge fee(s) indicated below Charge fee(s) indicated below.  WARNING: intornation on this form may become public. Credit card information should not be included on this form. Provide credit card information subhorization on PTO 2008.  BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES				_ '	Application Number	ber 1	10/802,098		
METHOD OF PAYMENT (check all that apply)			עבי ן	Filing Date	3/	3/16/2004			
TOTAL AMOUNT OF PAYMENT  (\$) 510.00    At Unit   3652     Attorney Docket No.   SPRNG-01001US1    METHOD OF PAYMENT (check all that apply)   Check   Credit Card   Money Order   None   Other (please identify);     Deposit Account Deposit Account Number. 06-1325   Deposit Account Name. 23910 - Fliesler Meyer LLP     For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   Charge fee(s) indicated below   Charge fee(s) indicated below   Charge any additional fee(s) or underpayments of fee(s)   Credit any everpayments     Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filling fee   Charge fee(s)   Charge fee(s) indicated below   Charge fee(s)   Charge fee(s) indicated below   Charge fee(s) indicated bel				First Named Inve	entor R	ichard Spr	ingwater		
METHOD OF PAYMENT (check all that apply)	Applicant claims se	mall entity status	See 37 CEP 1 27	,	Examiner Name	G	. Adams		
METHOD OF PAYMENT (check all that apply)  □ Check □ Credit Card □ Money Order □ None □ Other (please identify): □ Deposit Account Deposit Account Number. 06:1325 □ Deposit Account Name. 23910 - Fliesler Meyer LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) □ Charge fee(s) indicated below □ Charge fee(s) indicated below, except for the filling fee □ Charge any additional fee(s) or underpayments of fee(s) □ Credit any overpayments  WARNING: Indicated below □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below. Examplements and suther fee(s) indicated below. Examplements and suther fee (s) indica				<u> </u>	Art Unit	30	652 <sup>.</sup>		
Check Credit Card Money Order None Other (please identify):    Deposit Account Deposit Account Number: 06:132.5   Deposit Account Nume: 23910 - Flies er Meyer LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	TOTAL AMOUNT OF P	AYMENT (\$)	510.00		Attorney Docket	No. S	PRNG-0100	1US1	
Deposit Account Deposit Account Number 06:1325 Deposit Account Name: 23910 - Fliesler Meyer LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below	METHOD OF PAYM	ENT (check all	that apply)						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below	Check Credit Card Money Order None Other (please identify):								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below	Deposit Account	Deposit Account	Number: 06-13	325	Deposit Acc	count Name	: 23910 - Fli	esler Meyer LLP	
Charge any additional fee(s) or underpayments of fee(s)   Credit any overpayments	2			_					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.   FEE CALCULATION	Charge fe	e(s) indicated be	low		Charge	fee(s) inc	licated below, exc	ept for the filing fee	
WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card Information and authorization on PTO-2038.    FEE CALCULATION	Charge ar	ny additional fee(	s) or underpaymen	nts of fee	(s) Credit	any overpa	ayments		
Telephone   FEE CALCULATION	WARNING: Information on	this form may be		card info	ermation should no	t be includ	ed on this form. Pro	vide credit card	
1. BASIC FILING, SEARCH, AND EXAMINATION FEES   SEARCH FEES   SEARCH FEES   SEARCH FEES   Small Entity   Fee (\$)				<del>:</del>					
Pilling   Fee (\$)   Fee	-			<u> </u>					
Application Type	1. Basic filing, \$E 				CH FEES	EXAMIN	ATION FEES		
Utility 300 150 500 250 200 100  Design 200 100 100 50 130 65  Plant 200 100 300 150 160 80  Reissue 300 150 500 250 600 300  Provisional 200 100 0 0 0 0 0  2. EXCESS CLAIM FEES Fee 05 Fee (\$1 Fee (\$1)	Assissation Towns	S	mall Entity		Small Entity		Small Entity	Face Bold (6)	
Design   200   100   100   50   130   65								rees Pala (3)	
Plant   200   100   300   150   160   80	1							<del></del>	
Reissue 300 150 500 250 600 300  Provisional 200 100 0 0 0 0 0 0  2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claims over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims  Total Claims  Total Claims  Extra Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)  for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of bach additional 50 or fraction thereof  Fee Paid (\$)  Fee Paid	_								
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 2. EXCESS CLAIM FEES									
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Each independent claims  Fee (\$) Fee (\$) Fee (\$)  Multiple dependent claims  Total Claims Extra Claims Fee (\$) Fee Paid (\$)  HP = Indighest number of total claims paid for, if greater than 20  Indep. Claims HP = Indighest number of Independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  Fee Paid (\$)					1 - 1				
Fee (\$) Fee (\$) Fee (\$)  Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25  Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100  Multiple dependent claims 50 180  Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims  - 20 or HP =			100	,U	0	U	U		
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100  Multiple dependent claims									
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Total Claims   Extra Claims   Fee (\$)   Fee Paid (\$)   Multiple Dependent Claims			r Reissues, each	indepe	ndent claim mo	re than in	the original pat		
- 20 or HP =			Eng (\$)	Fee P	eld (\$)	Multiple	Dependent Claim		
HP = highest number of total claims paid for, if greater than 20   Indep. Claims				1,001	<u> </u>				
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APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 = /50 = (round up to a whole number) x =  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other: 37 CFR 1.136(a) Extension of Time - 3 months 510.00  SUBMITTED BY  Registration No. (Attomey/Agent) 25.656  Telephone 415.362.3800			X <u>F89 (\$)</u>	<u> </u>	BIG (\$)				
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. She 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets			said for, if greater than	n 3 !					
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  (round up to a whole number) x  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other: 37 CFR 1.136(a) Extension of Time - 3 months  Registration No. (Attomey/Agent) 25.656  Telephone 415.362.3800			100 -1		4 1!4!	: C		1125 for small antino	
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  4. OTHER FEE(\$) Non-English Specification, \$130 fee (no small entity discount) Other: 37 CFR 1.136(a) Extension of Time - 3 months 510.00  SUBMITTED BY Registration No. (Attorney/Agent) 25.656  Telephone 415.362.3800									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other: 37 CFR 1.136(a) Extension of Time - 3 months  SUBMITTED BY Registration No. (Altomey/Agent) 25.656  Telephone 415.362.3800									
Non-English Specification, \$130 fee (no small entity discount) Other: 37 CFR 1.136(a) Extension of Time - 3 months  SUBMITTED BY Registration No. (Attorney/Agent) 25.656  Telephone 415.362.3800	- 100	•	/ 50 =		(round up to a wi	hole numb	ег) х		
Non-English Specification, \$130 fee (no small entity discount)  Other: 37 CFR 1.136(a) Extension of Time - 3 months  SUBMITTED BY  Registration No. (Altomey/Agent) 25.656  Telephone 415.362.3800	4. OTHER FEE(\$)			:				Fees Paid (\$)	
SUBMITTED BY  Signature  Registration No. (Altomey/Agent) 25.656  Telephone 415.362.3800	Non-English Specification, \$130 fee (no small entity discount)								
Registration No. (Altomey/Agent) 25.656 Telephone 415.362.3800	Other: 37 CFR	1.136(a) E	xtension of I	<u> Time -</u>	3 months			510.00	
Registration No. (Altomey/Agent) 25.656 Telephone 415.362.3800	SUBMITTED BY		11 /						
	Signature 1	141	Xu/	F	Registration No.	5 656	Telephone	415.362.3800	
	Name (Print/Type) Mar	tin C. Fliesl	<del></del> er		amilianudelli Z	<u>0.000</u>			

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patant and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Attorney Docket No.: SPRNG-01001US1 mcf/sprng/1001US1/Reply A - FEE.pdf